



CITY OF RIO DELL

675 Wildwood Ave.

Rio Dell, CA 95562

Phone: (707) 764-3532

Fax: (707) 764-5480

APPLICATION FOR TEMPORARY WATER/SEWER SERVICE

Customer No. _____

Applicant Name: _____

Service Address _____ Apt No. _____

Mailing Address _____

Home Phone No. (____) _____ Cell Phone No. (____) _____

The base fee for the two weeks of service is \$61.27; any excess water use will be billed in addition to the \$61.27.

By signing this application, the applicant agrees to observe any city regulations now or hereafter adopted related to the water and sewer service and to pay all utility bills promptly. All unpaid charges and penalties are due and payable at the time of billing.

Effective turn on date: _____

Effective closing date: _____

I, the undersigned, understand that the water and sewer service is available beginning two weeks from the effective turn on date.

Signature _____ Date _____

Print Name _____

Office use only:

Route: _____ Service: _____ Date: _____ W.O. # _____

Meter NO.: _____ Reading: Old: _____ New: _____

Office use only:

Deposit Paid \$ _____

Application Accepted by _____

Rental Agreement []

Picture ID []